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**OFFICE OF PETITIONS**

PTO FAX NO.: 1 (571) 273-6500

Attorney Docket No.: G-01

Customer No: 21394

Application No.: 09/839,427

Deposit Account No.: 50-0359

Group Art Unit: 3739

**CERTIFICATION OF FACSIMILE TRANSMISSION**

In connection with U.S. Patent Application No. 09/839,427, filed April 20, 2001, U.S. Patent 6,974,453, granted December 13, 2005 by Jean Woloszko, et al., I hereby certify that the following Notification of Change of Entity Status and Correction of Erroneously Claimed Small Entity Status is being facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.

Number of pages being transmitted, including this page: 3

Dated: 04.16.2009

  
Jennifer M. Luhrman

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to the U.S. Patent and Trademark Office on the date shown below:

On 04.16.2009  
By Jonathan M. Luhman  
Jonathan M. Luhman

PATENT  
Attorney Docket No.: G-01

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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**OFFICE OF PETITIONS**

In re application of: Jean Woloszko, et al.

) Examiner: Lee Cohen

Application No.: 09/839,427 Filed: 4/20/2001

) Group Art Unit: 3739

Patent No.: 6,974,453

) Confirmation No.: 1754

For: DUAL MODE ELECTROSURGICAL CLAMPING  
PROBE AND RELATED METHODS) NOTIFICATION OF CHANGE OF  
) ENTITY STATUS TO LARGE  
) AND CORRECTION OF  
) ERRONEOUSLY CLAIMED SMALL  
) ENTITY STATUS**VIA FACSIMILE (571-273-6500)**

Mail Stop M Correspondence  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Applicants wish to notify the U.S. Patent and Trademark Office that small entity status is no longer appropriate for this patent application.

Applicants further wish to notify that the itemization and payment of deficiencies required for correction of erroneously claimed status as a small entity are submitted herewith pursuant to 37 C.F.R. § 1.28(c).

04/20/2009 DALLEN 00000039 500359 09839427

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Application No.: 09/839,427  
Page 2 of 2

Atty Docket No.: G-01

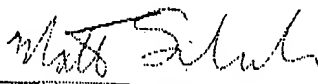
Itemization of the total deficiency payment:

Type	Date of Erroneous Payment	Current Fee Amount for Non-Small Entity	Amount Paid in Error	Deficiency Owed (Current Fee - Amt. Paid in Error)
Request for Continued Examination (RCE)	02/15/2005	\$810.00	\$395.00	\$415.00
Total Deficiency Owed				\$415.00

Applicants hereby authorize the Commissioner to charge \$415.00 to Deposit Account No. 50-0359 of ArthroCare Corporation, corresponding to the Total Deficiency Owed for the itemized fees for the above-referenced patent application.

Applicants believe no further fees are due at this time, however, the Commissioner is hereby authorized to charge any additional fees or credit any over payments to Deposit Account No. 50-0359 of ArthroCare Corporation, as necessary.

Respectfully submitted  
Attorney for Applicants,



Matthew Scheele  
Reg. No. 59,847

Date: 4/16/09

SEND CORRESPONDENCE TO:  
ARTHROCARE CORPORATION  
CUSTOMER NO. 21394  
512.358.5925  
512.391.3901 (fax)

~~spoke to customer and request  
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~~spoke 4-17-09 @ 2:40~~

~~Matthew~~